



Prevention Effort and Treatment of Acute Respiratory Infection Diseases in Children Age 2 to 4 Years in Six of Health Centre Regional Working Health Regency of Paniai District

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Abstract

Acute Respiratory Infection (ARI) is still listed as a major health problem for children in developing countries. Acute respiratory infection includes acute upper respiratory tract infection and acute lower respiratory tract infections. Data from 6 Health Centre in Paniai District on February 1, 2017 found that toddlers who visited the Health Centre in Paniai District Health Office during January 2017 amounted to 1111 cases. The purpose of this research is to know the effort of prevention and treatment of ISPA disease in children aged 2 to 4 years in six Health Centre working area of Paniai District Health Office. The type of research that can be used in this research is Qualitative and Technique study used is Focus Group Discussion (FGD) and survey. The results of the research in prevention efforts to avoid ARD disease associated with Healthy Clean Behavior (PHBS) is to always keep PHBS so as not exposed to ARI. Residents often maintain sanitation at home, away from toddlers from patients with cough respiratory infection, cleaning individual homes and families. Another effort of residents is by watering the road, the community always take their children to the Posyandu (Integrated Service Posts) for immunization and breastfeeding until the child aged 1 year. Treatment efforts, if exposed to ARI disease, residents always take care of at home, provide supplementary food and to relieve throat and relieve cough with a safe herb, provide warm water, lime and sweet soy sauce, rubbing eucalyptus oil and wind oil, compress with cold water, wrap with banana leaves and taro Manado.

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It is expected to be more intense to provide information to the public about ways or efforts to prevent and treat ARI disease. The health worker should always give or inform the PHBS and endeavor to always provide complete immunization.

Keywords: Prevention and Treatment of ARI.

1. Introduction

Acute Respiratory Infection (ARI) is currently listed as a major health problem for children in developing countries. ISPA infection includes acute upper respiratory infections and acute respiratory infections of the lower respiratory tract. PEI is a disease that affects mostly children. Respiratory tract diseases in infancy and children can also provide disability until adulthood, due to Chronic Obstructive Pulmonary Disease [1, 2].

ARI is also a major cause of childhood diseases and major killers. Cough disease in infants in Indonesia is estimated to occur three to six times per year with the number of ARI cases in the community estimated at 10% of the population [3]. A total of 20 -40% of all hospitalizations among children are due to acute respiratory infections. Infant mortality rate due to ARI in Indonesia increased by 20.6% from 2010 to 2011 which is 18.2% to 38.8%. The highest mortality rate among the 10 most prevalent diseases in hospitalized patients in Indonesia is ISPA (pneumonia) which is 1,315 people and in outpatient ARI has the highest number of cases amounted to 291,356 cases [4]. According to Raharjo and his colleagues [5] there are many factors that underlie the course of ARI disease in children. This is related to the host, the disease agent and the environment. According to the results of research conducted by Nurhidayah and his colleagues [6], shows there are still respondents (14.28%) have a poor effort in preventing ARI in infants, half of respondents (57.14%) have bad effort, small respondent (26.19%) have good effort and very few respondents (2.38%) have good effort in preventing ARI in children under five. Transmission or spread of ARI is very easy by direct contact or through droplets, more importantly indirect contagion can occur through the hands and items recently contaminated by the nasal and mouth droppings of an infected person [7,8]. To reduce the possibility that can increase the potential of children exposed to respiratory infection, it is necessary prevention efforts.

Based on preliminary study at 6 Health Centre in Paniai District on February 1, 2017, it was found that toddlers who visited Health Centre in Paniai District Health Office during January 2017 amounted to 1,114 cases. Based on the results of interviews with the responsible P2 ISPA Health Centre in Paniai District Health Office said the average visit of children with ARI to Health Centre in Paniai District Health Office about 100-200 per month because most people who live in Honai house with sleeping habits, making fires for warming bodies and tidal road construction that affects high dust due to air pollution around the workplace or the environment surrounding the construction of roads passed by the community. Research Objectives Knowing the prevention and treatment of ARI disease in children aged 2 to 4 years in six Health Centre working area Paniai District Health Office.

2. Materials and Methods

The type of research that can be used in this study is a qualitative study that illustrates the prevention and

treatment of ARI in children aged 2 to 4 years in six Health Centre working area Paniai District Health Office. The techniques used are Focus Group Discussion (FGD) and survey. FGDs were conducted to collect participatory information, especially on patients including families with respiratory infection and survey techniques performed using questionnaire. This research was conducted in six Health Centre working area of Paniai District Health Office. The study lasted for 1 month from June 2017 to July 2017. The population in this study were children aged 2 to 4 years in six Health Centre working area Paniai District Health Office. Samples of research are all of the population that can be found according to age 2 to 4 years in six Health Centre working areas in Paniai District Health Office. The number of samples in the study were 37 people.

3. Results

3.1 Characteristics of Informants

Based on the results of research that has been done on 37 respondents. Characteristics of gender, age, and informant education are as follows:

Table 1: Characteristics of Informants at Health Centre in Paniai District (n = 37)

Respondent characteristics	Number (n)	(%)
Sex		
Male	4	10.8
Female	33	89.2
Age		
21-25 year	2	5.4
26-30 year	24	64.9
31-35 year	8	21.6
36-40 year	3	8.1
Education		
Basic school	19	51.4
Junior high school	5	13.5
Senior high school	4	10.8
Diploma 3	6	16.2
Bachelor	3	8.1
Tribe		
Mee	35	96
Makassar	2	6
Religion		
Kristen/Nasrani	35	96
Islam/moslem	2	6

Based on Table 1 above, it can be seen that the informants in this research are mostly female, that is 33 (89,2%), based on age mostly 26-30 years old 24 (64,9%), big elementary school education as much as 19 (51,54%) informant.

3.2 Efforts to Prevent Acute Respiratory Infection in Paniai District

Efforts to prevent ARI disease in Paniai District will be analyzed in several sections to answer the formulation of research problems namely; how is the prevention and treatment of ARI disease in Paniai District. Analysis of efforts to prevent ARI disease in Paniai District is needed in exploring the problems in this study, then presented excerpts of interviews and observations that researchers have described the following. Here are the opinions of the subject (excerpts of the interview) about prevention efforts that you will not be affected by ARD disease related to Healthy Clean Living Behavior (PHBS) as follows:

"... Always keep PHBS from being exposed to ARI, as stated by one of the respondents ie EA 03 year old man" ... (EA 03 years).

Based on the opinion of the subject (interview excerpts) above that prevention efforts are made to avoid ARI disease associated with Healthy Clean Behavior (PHBS) is to always keep PHBS so as not exposed to ARI. Sometimes parents always take care of PHBS so that children do not get sick especially ISPA, although not all citizens can keep PHBS or sometimes keep PHBS at home and sometimes not. Because sometimes because children do not want to hear so do not follow the advice of parents about the dangers of PHBS. PAK ISPA officers also always provide information about PHBS, but residents themselves do not attempt to do so. Another effort of residents is by sprinkling the streets, because the dust is always ARI as it enters through the nose.

Here is the opinion of the subject (interview excerpts) about prevention efforts that father / mother / brother / i do so as not exposed to ARI disease associated with complete immunization as follows:

"... always taken to Posyandu (Integrated Service Posts) because immunization is important for children, increase immunity for the incidence of disease" ... (B.A 04 years, E.N 03 year old Momtaza 05). Based on the opinion of the subject (interview quotes) above that the prevention efforts that father / mother / brother / i do not to get ARI disease associated with complete immunization is that the residents always take their children to the Integrated Service Posts for immune immunization from the entry of various diseases. Because immunization is good for forming childhood antibodies. But there is also a opinion that after immunization body feel hot, so often lazy to bring her child to Integrated Service Posts. Some residents also have awareness to provide complete immunization every month to Integrated Service Posts because if not immunized easily ill. The role of health workers, usually here full immunization, but sometimes his parents always criticize because after the child's immunization is hot, but as health workers always provide information about complete immunization, so that all people have understood and not like the beginning.

Here is the opinion of the subject (interview excerpts) about prevention efforts that father / mother / brother / i do so as not exposed to ARI disease associated with breastfeeding as follows:

"... always give breast milk until 1 year old child. Prompted by 04 respondents "... (WP 02 years). Based on the opinion of the subject (interview quotes) above that the prevention efforts to avoid ARD disease related to breastfeeding is that the residents always give breast milk until the child is 1 year old. But there are also who argue for lack of breast milk so as to provide formula milk. However, some residents here residents always give exclusive breastfeeding just because they do not know the formula. According to ASI is the best drink for children aged 0 months - 1 year. Regarding the role of health workers, mothers here always give milk only because as health workers always convey that ASI is the best drink / food for children.

Here is the opinion of the subject (interview excerpts) about prevention efforts that father / mother / brother / i do so as not to get ARI disease associated with the role of the family as follows: "... the role of the family is very rare for fathers" ... (EN 03 years, B.A 04 years, WP 02 years, EA 03 years). Based on the opinion of the subject (interview quotes) above that the prevention efforts to avoid ARD disease related to the family role is the role of the family is very rare for the fathers, because according to the fathers that it is the duty of the mother who always cares about the child, take care of the child when sick it only moms. Health workers role that usually the mothers always try to protect, but sometimes his father lazy to know.

3.3 Efforts of ARI Treatment in Paniai District

Efforts to treat ARI disease in Paniai District will be analyzed in several sections to answer the formulation of research problem that is; how is the prevention and treatment of ARI disease in Paniai District. Analysis of ARI disease treatment efforts in Paniai District is very necessary in exploring the problems in this study, then presented excerpts of interviews and observations that have researchers described below. Here is the opinion of the subject (excerpts of the interview) about the treatment efforts that father / mother / brother / do, if exposed to ARI disease related to ARI care at home as follows:

"... always take care of at home for healing his son, but from his mother" ... (WP 02 years, MZ 03 years, BA 04 years, EN 04 years, EA 03 years). Based on the opinion of the subject (interview quotes) above that the treatment effort done, if exposed to ARI disease in relation to ARI care at home is the residents always take care at home for healing the child, but from his mother generally is by way to the Health Centre. This is because who always take care of the children are mothers. So once the residents treatment always take care of the child at home until the medicine runs out and sometimes control back to the hospital again. In addition, because at home there is no help gardening work today is rain and cold, so sometimes the ISPA recur back again. Then related to the role of health officers that Health centre good service, but sometimes the medicine is less. Health worker usually give medicine that there is and sometimes only.

Here is the opinion of the subject (excerpts of the interview) about the treatment efforts of the father / mother / brother / i do, if exposed to ARI disease in connection with the provision of nutrients as follows:

"... During illness always provide nutrition / balanced nutrition food. During illness and after illness, (BA 04 years, EN 03 years, MZ 03 years).Based on the opinion of the subject (interview quotes) above that the treatment effort done, if exposed to ARI disease in connection with the provision of nutrients that during illness

always provide nutrition / nutritional food balance, but if it is healed not. Some residents always provide balanced nutrition such as green vegetables without preservative processed from chemicals. Time 2 (two) years and below it still provides green vegetables without chemical preparation, but now it's been four years that want a snack so lazy to eat. As parents try to provide adequate nutrition in children, but sometimes they are not healthy snacks so usually exposed to respiratory infection. People here in general also provide enough food such as vegetables without preservatives. Here is the opinion of the subject (interview excerpts) about the treatment performed, if exposed to ARI disease in relation to relieve throat and relieve cough with the safe herb as follows: "... by way to the nearest health center / health worker (EA 03 years, WP 02 years, BA 04 years, EA 03 years).

Based on the opinion of the subject (interview quotes) above that the treatment effort done, if exposed to ARI disease in relieving the throat and relieve cough with a safe herb is the treatment effort done, if exposed to ARI disease in relation to relieve throat and relieve cough with the ingredients safe is by way to the health center / health officer nearby. Also provide warm water and lime and sweet soy sauce to relieve the throat. Some residents also relieve throat and relieve with a safe herb or always provide a drink of warm water so that his throat is legit. There are also residents who are rubbing eucalyptus oil and wind oil. Previously people used traditional medicine especially lime, but now it is not. They always love to drink warm water to relieve throat sometimes also rubbed eucalyptus oil.

Here are the opinions of the subject (medication interview) about the medication that you have done, if exposed to ARIs related to home care during the fever as follows:

"... Always compress with water, (EA 03 year, WP 02 year, MZ 03 year, BA 04 year, EN 03 year.). Based on the opinion of the subject (interview quotes) above that the treatment effort is done, if exposed to ARI disease in connection with home care during fever with always compress with water, wrap with banana leaves and Manado taro. Some citizens also take the first action to reduce the fever with water compress or wrap with the leaves of Manado taro, banana leaf, but if not helped new take to health center for treatment. Associated with the role of health officers at each time there ISPA patients, as health workers provide counseling about the dangers of ARD if not keep PHBS in the household. As a P2 ISPA officer always gives information of ARI if the child of father / mother does not get complete immunization, but some are done and some are not. Health officer always give advice, if child does not go down fever, immediately take it to the nearest health center for treatment. Although there are residents also suggested sometimes given the drug only that's it, the tool is also not complete, the officer is not fixed / lazy.

4. Discussion

4.1 Characteristics of Informants

The result of informant characteristic shows that most of them are female (28, 87,5%). This gender provides insight into a trait or feature that distinguishes biologically male or female. Boys or girls younger than 2 years are at greater risk than older children. This condition may be because in children under 2 years of immunity is

not perfect and lumen airway channel is relatively narrow.

Most of the informants aged 25-35 years of age were 29 (90.6%). This shows that most of the informants are adults from early to mid-adult. Individual life counted from birth to birthday. The more age, the maturity and strength of a person will be more mature in thinking and working. With the age of a person there will be changes in psychological and psychological aspects (mental). Physical growth in outline there are four categories of change, namely the size change, the change in proportion, the loss of old traits and the emergence of new traits. This occurs due to the maturation of organ function. On the psychological and mental aspects of the level of thinking a person more mature and mature [9-11].

Most mothers with basic education are 20 (62.5%) informants. Education is basically any planned effort to influence providing protection and assistance so that participants have the ability to meet expectations. Education can also be said as a process of personal maturity. The level of education is a factor that helps determine whether the parents are easy to absorb, motivated and understand the information obtained. The level of education of the mother forms the values for a person especially in accepting new things. The higher the level of parental education, the easier one absorbs information about education and health .

4.2 Efforts to Prevent Acute Respiratory Infection in Paniai District

The results of the analysis indicate that it is known that the prevention efforts to avoid ARD disease related to Healthy Clean Living Behavior (PHBS) is to always keep PHBS in order to avoid ARI. Residents often maintain sanitation at home, away from toddlers from patients with cough respiratory infection, cleaning individual homes and families. Another effort of residents is by sprinkling the streets, because the dust is always ARI as it enters through the nose. In addition, residents always take their children to Integrated Service Posts for immune immunization from the entry of various diseases. Residents also have awareness to provide complete immunization every month to Integrated Service Posts because if not immunized easily ill. Residents also always provide breast milk to children aged 1 year. According to ASI is the best drink for children aged 0 months - 1 year.

Related to the role of health workers that health workers always give or speak about PHBS, but the residents themselves who do it sometimes only. PAK ISPA officers also always provide information about PHBS, but residents themselves do not attempt to do so. Family empowerment can be viewed as a process of establishing clients in controlling their health status. Family empowerment has the meaning of how families enable themselves by facilitating others to improve or control the health status of families by increasing the ability of families to perform family health care functions and duties. Nevertheless, the optimization of the family empowerment approach can be derived from the existence of a model that will be used as guidelines and references when performing nursing services.

The spread of infectious diseases, especially the infection of ARI can be prevented by healthy life behavior. Healthy lifestyle habits will improve health status both for individuals and the environment, but awareness to familiarize healthy life behavior still needs to be improved, because there are still residents who have not been

consciously moved to implement Healthy Clean Living Behavior. If there is no PHBS, there will be factors that increase the risk of death from ARI by age less than two months, low socioeconomic level, malnutrition, low birth weight, low level of mother education, low level of service (outreach) health, density of residence, inadequate immunization and chronic illness [4, 12,13]

4.3 Efforts of ARI Treatment in Paniai District

The results of the analysis indicate that the treatment effort done, if exposed to ARI disease in relation to ARI treatment at home is the residents always take care of at home for healing the child, although generally is by way to the Health Centre. If exposed to ARI disease in connection with the provision of nutrients, that is during illness always provide nutrition / balanced nutrition and residents always provide balanced nutrition such as green vegetables without preservative processed from chemicals, and rice. There are also residents who provide additional food nutritious biscuits, porridge, eggs, rice from the Health Office. In addition, if exposed to ARI disease in relation to relieve the throat and relieve cough with a safe herb, provide warm water and lime and sweet soy sauce, rubbing eucalyptus oil and wind oil or by way to the nearest health center / healthcare worker. Treatment efforts performed, if exposed to ARI disease in connection with home care during fever with always compress with water, wrap with banana leaves and taro Manado. Some residents also take the first action to reduce the fever with a compress of water or wrap with the leaves of Manado taro, banana leaf, but if not helped new take to Health Centre for treatment.

Associated with the role of health officers that Health centre good service, but sometimes the medicine is less. Health worker usually give medicine that exist only and sometimes only. Usually here is a complete immunization, but sometimes his parents always criticize because after the immunization of his son is hot, but as health workers always provide information about complete immunization, so that all people have understood earlier. Mother is the person who is closest to the child and has a big role in caring for her child. Home care is very important to support the healing of children who are suffering from ARI and prevent recurrence.

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